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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 532212000100																								
Application Number 10/799,476		Filed March 11, 2004																								
For	METHODS FOR IDENTIFYING AND PRODUCING SPECIFIC AMINO ACID DEPENDENT ANTIBODIES AND USES THEREOF																									
Art Unit	1647	Examiner R. Deberry																								
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.																										
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):																										
<table> <thead> <tr> <th></th> <th><u>Fee</u></th> <th><u>Small Entity Fee</u></th> <th></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td>\$120</td> <td>\$60</td> <td>\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>\$450</td> <td>\$225</td> <td>\$ 225.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td>\$1020</td> <td>\$510</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>\$1590</td> <td>\$795</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>\$2160</td> <td>\$1080</td> <td>\$ _____</td> </tr> </tbody> </table>				<u>Fee</u>	<u>Small Entity Fee</u>		<input type="checkbox"/>	\$120	\$60	\$ _____	<input checked="" type="checkbox"/>	\$450	\$225	\$ 225.00	<input type="checkbox"/>	\$1020	\$510	\$ _____	<input type="checkbox"/>	\$1590	\$795	\$ _____	<input type="checkbox"/>	\$2160	\$1080	\$ _____
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<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u> <u>I have enclosed a duplicate copy of this sheet.</u>																										
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>44,422</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 <u>_____</u> .																										
<u>/Michael G. Smith/</u> Signature		August 29, 2007 Date																								
<u>Michael G. Smith</u> Typed or printed name		(858) 720-5113 Telephone Number																								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.																										
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.																										

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

sd-388985